

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	N.A		02/23/01
O.I.P.E. CLASSIFIER		8	03/16/01
FORMALITY REVIEW	A.S	943	4-9-1
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	12/19/03
2	✓	✓	11/18/04
3	✓	✓	11/18/04
4	✓	✓	11/18/04
5	✓	✓	11/18/04
6	✓	✓	11/18/04
7	✓	✓	11/18/04
8	✓	✓	11/18/04
9	✓	✓	11/18/04
10	✓	✓	11/18/04
11	✓	✓	11/18/04
12	✓	✓	11/18/04
13	✓	✓	11/18/04
14	✓	✓	11/18/04
15	✓	✓	11/18/04
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26	✓	✓	11/18/04
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46	✓	✓	11/18/04
47	✓	✓	11/18/04
48	✓	✓	11/18/04
49	✓	✓	11/18/04
50	✓	✓	11/18/04

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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